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| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL | Attorney Docket No.:    | CS23688RL   |
|  | First Inventor:         | Aerrabotu, Naveen et al.  |
|  | Title:                  | ROAMING INDICATORS FOR MULTI-MODE<br>WIRELESS COMMUNICATION DEVICES |
|  | Express Mail Label No.: | EL977214979US   |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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| APPLICATION ELEMENTS<br>(see MPEP chapter 600 concerning<br>utility patent application contents) | ADDRESS TO:<br>Mail Stop Patent Application<br>Commissioner for Patents<br>P. O. Box 1450<br>Alexandria, VA 22313-1450 |
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| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate<br>(Submit an original and a duplicate for fee processing)<br>2. <input type="checkbox"/> Applicant claims small entity status<br>See 37 CFR 1.27<br>3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="17"/><br>(preferred arrangement set forth below)<br>-Descriptive title of the invention<br>-Cross Reference to Related Applications<br>-Statement Regarding Fed sponsored R&D<br>-Reference to sequence listing, a table,<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="7"/><br>5. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37<br>CFR 1.63(d)) (for continuation/ divisional with<br>Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting<br>inventor(s) named in the prior application,<br>see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large<br>table or Computer Program (Appendix)<br>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence<br>(if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CFR)<br>b. <input type="checkbox"/> Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);<br>ii. <input type="checkbox"/> or paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies<br> |
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| ACCOMPANYING APPLICATION PARTS   |  |
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney<br>Statement (when there is an assignee)<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input checked="" type="checkbox"/> IDS <input type="text" value="3"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>15. <input type="checkbox"/> Certified Copy of Priority Document<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C.<br>122(b)(2)(B)(i). Applicant must attach form<br>PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: _____<br>_____<br>_____<br>_____ |  |

  

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) Prior Appl. No.

Prior Appl. information: Examiner:  Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

|   |                                 |                                    |              |                             |              |                              |  |
|---|---------------------------------|------------------------------------|--------------|-----------------------------|--------------|------------------------------|--|
| 19. CORRESPONDENCE ADDRESS  |                                 |                                    |              |                             |              |                              |  |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |                                 | <input type="text" value="20280"/> |              | or <input type="checkbox"/> |              | Correspondence address below |  |
| Name  | Shigeharu Furukawa              |                                    |              |                             |              |                              |  |
| Address   | Motorola, Inc. - Law Department |                                    |              |                             |              |                              |  |
|   | 600 North U.S. Highway 45       |                                    |              |                             |              |                              |  |
| City  | Libertyville                    | State                              | IL           | Zip Code                    | 60048        |                              |  |
| Country   | U.S.A.                          | Telephone                          | 847-523-1987 | Fax                         | 847-523-2350 |                              |  |
| Name  | Shigeharu Furukawa              |                                    |              | Registration No.            | 50,481       |                              |  |
| SIGNATURE   | <i>Shigeharu Furukawa</i>       |                                    |              | Date                        | 12/15/03     |                              |  |

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| <b>FEE TRANSMITTAL</b><br>Patent fees are subject to annual revision<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |                   | <b>Complete if Known</b>   |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|--|-------------------|--|--------------------------|--|--------------------|-----------------|----------|-----------------|----------|----------|----------|--------------------|------|------|------|------|-------------------------------------|-------------------|----|------|-----|-------------------------------------|------|------------------|------|------|---------------------------|------|------|--------------------|------|---|------|------|------|------------------------|--|---------------------|-------|------|-------|---|--------------------|--|------|--------------|--|--------------|----------------|----------|-----|---|------|-----|------|--------------------|--|------|------|------|--------------------|---|------|------|------|----------------|--|----------------|-----------------|-----------------|------|------------------|------|-----|------------------------|------|--|------|-----|-----------------------------------|------|--------------------------|------|------|---------------------------------------|------|---|------|-----|---|------|----------------------------------|------|------|---|---------------------|------------------------------------|------|------|------|------------------|--------------------------------|------|-----|------|-----|------------------|------|-----|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|---------------------------|--|--|--|--|
|  |                   | Application Number   |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |                   | Filing Date  | 12/15/03                 |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |                   | First Named Inventor   | Aerrabotu, Naveen et al. |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |                   | Examiner Name  |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |                   | Group Art Unit   |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT  |                   | Attorney Docket No.  | CS23688RL                |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |                   |  |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>METHOD OF PAYMENT (check all that apply)</b>  |                   | <b>FEE CALCULATION (continued)</b>   |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number <b>502117</b><br>Deposit Account Name <b>Motorola, Inc.</b>  |                   | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> </tbody> </table> |                          | Large Entity   |                    | Small Entity    |          | Fee Description | Fee Code | Fee (\$) | Fee Code | Fee (\$)           | 1051 | 130  | 2051 | 65   | Surcharge - late filing fee or oath | 1052              | 50 | 2052 | 25  | Surcharge - late Provisional filing | 1053 | 130              | 1053 | 130  | Non-English specification | 1812 | 2520 | 1812               | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920*                   | Requesting publication of SIR prior to Examiner action | 1805                | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251               | 110  | 2251 | 55           | Extension for reply within first month | 1252         | 420            | 2252     | 210 | Extension for reply within second month | 1253 | 950 | 2253 | 475                | Extension for reply within third month | 1254 | 1480 | 2254 | 740                | Extension for reply within fourth month | 1255 | 2010 | 2255 | 1005           | Extension for reply within fifth month | 1401           | 330             | 2401            | 165  | Notice of Appeal | 1402 | 330 | 2402                   | 165  | Filing a brief in support of an appeal | 1403 | 290 | 2403                              | 145  | Request for oral hearing | 1451 | 1510 | 1451                                  | 1510 | Petition to institute a public use proceeding | 1452 | 110 | 2452  | 55   | Petition to revive - unavoidable | 1453 | 1330 | 2453  | 665                 | Petition to revive - unintentional | 1501 | 1330 | 2501 | 665              | Utility issue fee (or reissue) | 1502 | 480 | 2502 | 240 | Design issue fee | 1503 | 640 | 2503 | 320 | Plant issue fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | 1806 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  |
| Large Entity   |                   | Small Entity   |                          | Fee Description  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Fee Code   | Fee (\$)          | Fee Code   | Fee (\$)                 |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1051   | 130               | 2051   | 65                       | Surcharge - late filing fee or oath  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1052   | 50                | 2052   | 25                       | Surcharge - late Provisional filing  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1053   | 130               | 1053   | 130                      | Non-English specification  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1812   | 2520              | 1812   | 2520                     | For filing a request for ex parte Reexamination                            |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1804   | 920*              | 1804   | 920*                     | Requesting publication of SIR prior to Examiner action                     |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1805   | 1840*             | 1805   | 1840*                    | Requesting publication of SIR after Examiner action                        |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1251   | 110               | 2251   | 55                       | Extension for reply within first month                                     |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1252   | 420               | 2252   | 210                      | Extension for reply within second month                                    |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1253   | 950               | 2253   | 475                      | Extension for reply within third month                                     |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1254   | 1480              | 2254   | 740                      | Extension for reply within fourth month                                    |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1255   | 2010              | 2255   | 1005                     | Extension for reply within fifth month                                     |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1401   | 330               | 2401   | 165                      | Notice of Appeal   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1402   | 330               | 2402   | 165                      | Filing a brief in support of an appeal                                     |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1403   | 290               | 2403   | 145                      | Request for oral hearing   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1451   | 1510              | 1451   | 1510                     | Petition to institute a public use proceeding                              |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1452   | 110               | 2452   | 55                       | Petition to revive - unavoidable   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1453   | 1330              | 2453   | 665                      | Petition to revive - unintentional   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1501   | 1330              | 2501   | 665                      | Utility issue fee (or reissue)   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1502   | 480               | 2502   | 240                      | Design issue fee   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1503   | 640               | 2503   | 320                      | Plant issue fee  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1460   | 130               | 1460   | 130                      | Petitions to the Commissioner  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1807   | 50                | 1807   | 50                       | Processing fee under 37 CFR 1.17(q)  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1806   | 180               | 1806   | 180                      | Submission of IDS  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 8021   | 40                | 8021   | 40                       | Recording each patent assignment per property (times number of properties) |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1809   | 770               | 2809   | 385                      | Filing a submission after final rejection (37 CFR § 1.129(a))              |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1810   | 770               | 2810   | 385                      | For each additional invention to be examined (37 CFR § 1.129(b))           |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1801   | 770               | 2801   | 385                      | Request for Continued Examination (RCE)                                    |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1802   | 900               | 1802   | 900                      | Request for expedited examination of a design application                  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Other fee (specify) _____  |                   |  |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>FEE CALCULATION</b>   |                   |  |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>1. BASIC FILING FEE</b><br><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>770</td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td><td><b>(\$ 770.00)</b></td></tr> </tbody> </table> |                   | Large Fee Code   | Entity Fee (\$)          | Small Fee Code   | Entity Fee (\$)    | Fee Description | Fee Paid | 1001            | 770      | 2001     | 385      | Utility filing fee | 770  | 1002 | 340  | 2002 | 170                                 | Design filing fee |    | 1003 | 530 | 2003                                | 265  | Plant filing fee |      | 1004 | 770                       | 2004 | 385  | Reissue filing fee |      | 1005  | 160  | 2005 | 80   | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |       |      |       |   | <b>(\$ 770.00)</b> | <b>2. EXTRA CLAIM FEES</b><br><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>18</td> <td>20</td> <td>0</td> <td>18</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>0</td> <td>86</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>290</td> <td></td> </tr> </tbody> </table><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>* Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>* Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td><td><b>(\$ 0.00)</b></td></tr> </tbody> </table> <p>**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br/>         *For Reissues, see above</p> |      | Total Claims | Previously Paid**                      | Extra Claims | Fee from below | Fee Paid | 18  | 20                                      | 0    | 18  | 0    | Independent Claims | 3                                      | 0    | 86   | 0    | Multiple Dependent |   |      | 290  |      | Large Fee Code | Entity Fee (\$)                        | Small Fee Code | Entity Fee (\$) | Fee Description | 1202 | 18               | 2202 | 9   | Claims in excess of 20 | 1201 | 86                                     | 2201 | 43  | Independent claims in excess of 3 | 1203 | 290                      | 2203 | 145  | Multiple dependent claim, if not paid | 1204 | 86  | 2204 | 43  | * Reissue independent claims over original patent | 1205 | 18                               | 2205 | 9    | * Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (2)</b> |                                    |      |      |      | <b>(\$ 0.00)</b> |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code   | Entity Fee (\$)          | Fee Description  | Fee Paid           |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1001   | 770               | 2001   | 385                      | Utility filing fee   | 770                |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1002   | 340               | 2002   | 170                      | Design filing fee  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1003   | 530               | 2003   | 265                      | Plant filing fee   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1004   | 770               | 2004   | 385                      | Reissue filing fee   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1005   | 160               | 2005   | 80                       | Provisional filing fee   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (1)</b>  |                   |  |                          |  | <b>(\$ 770.00)</b> |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Total Claims   | Previously Paid** | Extra Claims   | Fee from below           | Fee Paid   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 18   | 20                | 0  | 18                       | 0  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Independent Claims   | 3                 | 0  | 86                       | 0  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Multiple Dependent   |                   |  | 290                      |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code   | Entity Fee (\$)          | Fee Description  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1202   | 18                | 2202   | 9                        | Claims in excess of 20   |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1201   | 86                | 2201   | 43                       | Independent claims in excess of 3  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1203   | 290               | 2203   | 145                      | Multiple dependent claim, if not paid                                      |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1204   | 86                | 2204   | 43                       | * Reissue independent claims over original patent                          |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1205   | 18                | 2205   | 9                        | * Reissue claims in excess of 20 and over original patent                  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (2)</b>  |                   |  |                          |  | <b>(\$ 0.00)</b>   |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>SUBMITTED BY</b><br>Name (Print/Type) <b>Shigeharu Furukawa</b><br><br>Signature <i>Shigeharu Furukawa</i>  |                   | <b>Complete (if applicable)</b><br>Registration No. <b>50,481</b> Telephone <b>847-523-1987</b><br><br>Date <b>12/15/03</b>  |                          |  |                    |                 |          |                 |          |          |          |                    |      |      |      |      |                                     |                   |    |      |     |                                     |      |                  |      |      |                           |      |      |                    |      |   |      |      |      |                        |  |                     |       |      |       |   |                    |  |      |              |  |              |                |          |     |   |      |     |      |                    |  |      |      |      |                    |   |      |      |      |                |  |                |                 |                 |      |                  |      |     |                        |      |  |      |     |                                   |      |                          |      |      |                                       |      |   |      |     |   |      |                                  |      |      |   |                     |                                    |      |      |      |                  |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |

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